

EXHIBIT A

FREQUENTLY ASKED QUESTIONS

- GENERAL

- **What is Safehouse?**

Safehouse is a privately funded, 501(c)(3) tax-exempt, Pennsylvania nonprofit corporation whose mission is to save lives by providing a range of overdose prevention services.

The leaders and organizers of Safehouse are motivated by the Judeo-Christian beliefs ingrained in us from our religious schooling, our devout families and our practices of worship. At the core of our faith is the principle that preservation of human life overrides any other considerations.

Safehouse is one element of a much-needed comprehensive plan to address a public health crisis. The organization seeks to open the first safe injection site in the U.S. providing a range of overdose prevention services, including safe consumption and observation rooms staffed by a medical staff prepared to administer overdose reversal if needed. Additional services would include on-site initiation of Medically Assisted Treatment (MAT), recovery counseling, education about substance use treatment, basic medical services, and referrals to support services such as

housing, public benefits, and legal services.

Safehouse is working with community partners to find suitable locations to deliver this unified range of services.

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◦ **Where will Safehouse be located?**

Safehouse locations will be determined by community and city input, as well as data that show the areas where the greatest need exists. Safehouse considers it a priority to be a good neighbor, so locations will be selected in consultation with local leaders, businesses and residents.

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◦ **Who will deliver services at Safehouse?**

Medically trained professionals, certified peer specialists, recovery specialists, social workers, and case managers specializing in overdose prevention and harm reduction will provide Safehouse services.

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◦ **When will Safehouse begin operating in Philadelphia?**

Safehouse remains committed to opening as soon as possible, but is awaiting the resolution of a civil lawsuit the U.S. Attorney for the Eastern District of Pennsylvania filed against it. Safehouse has

asked the Court to declare its planned operations legal.

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◦ **Why do we need overdose prevention services in Philadelphia?**

Philadelphia is experiencing an overdose crisis of unprecedented proportion. In 2015, the city's rate of 46.8 drug overdose deaths per 100,000 residents dramatically outpaced those of Chicago (11.8) and New York (13.7).[4], [5] In 2017, the 1,217 overdose deaths in Philadelphia [6] represented a 34 percent increase from 907 in 2016.[7] In 2018, fatalities slightly decreased to 1,116 overdose deaths. Since 2009, overdose deaths in the city have risen by nearly 200 percent.[8] Philadelphia has not had a public health crisis of this magnitude in more than 100 years.[9] Across all racial and ethnic groups, more people have died from drug overdose than from homicide.[10],[11]

This crisis led the Mayor's Task Force to Combat the Opioid Epidemic in Philadelphia to recommend that the city further explore implementing overdose prevention services and expand treatment access and capacity. Overdose prevention services have a long record of success in reducing harms of injecting heroin and other opioids.[12]

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◦ **Will Safehouse provide illegal drugs to participants?**

Under no circumstances will Safehouse make available any narcotic or opioid, other than those that are FDA-approved for treating opioid addiction.

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◦ **Will Safehouse encourage people to use drugs?**

We are not aware of any credible evidence that suggests supervised consumption sites encourage increased drug use or initiate new users.

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◦ **How will Safehouse help participants to learn more about treatment for substance use?**

Participants will be presented with rehabilitation options at multiple points during their Safehouse visit, beginning with when they arrive and go through a registration process. A physical and behavioral health assessment will be conducted, and a range of overdose prevention services offered.

From the consumption area, participants will be directed to the medically supervised observation room and offered on-site initiation of Medication Assisted Treatment (MAT), wound care, and referrals to primary care, social services, and housing opportunities. Upon arrival, participants may choose to go directly

to the observation room to access MAT and other services.

Certified peer specialists, recovery specialists, social workers, and case managers will encourage treatment readiness and facilitate access to medical and social services. As participants leave, additional data will be collected, treatment, medical and social services will be offered again, and naloxone will be distributed.

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◦ **How will Safehouse prevent fatal overdoses?**

Medical personnel will always be on duty to observe and assess participants in both the consumption room and the post-consumption observation room. Medical personnel will immediately intervene in the event of an overdose, administering oxygen and/or naloxone. No overdose deaths have been reported at any of the more than 120 supervised consumption sites worldwide.[17],[18]

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◦ **Which drugs will Safehouse provide supervised injection oversight?**

Safehouse staff will not monitor the type of consumption by participants. Safehouse personnel will be available to advise on sterile injection technique in order to reduce the risks of skin infections but will not place needles or administer any narcotic or opioid, nor encourage the use of any drug. No consumption by

smoking will be allowed unless appropriate ventilation is available.

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• **SAFE INJECTION SITES AND HARM REDUCTION**

◦ **What is harm reduction?**

Harm reduction in substance use treatment is aimed at decreasing the negative consequences of substance use, and it includes elements of safer use, managed use, and medication-supported treatment plans. Harm reduction is designed to address the circumstances of the addiction in addition to the addiction itself, striving to minimize the harmful effects of addiction while recognizing that drug addiction cannot be completely eliminated. Current leading scholarship establishes that a demonstrably effective approach to combating substance use disorder is to encourage treatment while providing harm reduction.[3]

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◦ **Do safe injection sites exist elsewhere?**

Yes. The first government-authorized supervised consumption room opened more than 30 years ago in Switzerland. Today, more than 120 supervised consumption sites are operating in Europe, Australia, and Canada. The availability of overdose prevention services is increasing as research confirms the effectiveness and the advantages to the broader community. Currently, no such program exists in the United States.

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◦ **What are the benefits of overdose prevention services?**

Overdose prevention services are part of a multifaceted public health approach to combating the opioid crisis. Extensive research has demonstrated the benefits of overdose prevention services for people who use drugs and the communities where drug use occurs.[13],[14],[15],[16]

Overdose prevention services:

- **SAVE LIVES** by reducing the number of fatal drug overdoses through education on safer use practices, overdose prevention, and intervention.
- **REDUCE THE SPREAD OF INFECTIOUS DISEASES** such as HIV and hepatitis C among people who use drugs by providing sterile consumption supplies.
- **CONNECT PEOPLE** who use drugs with other health, treatment, and social services.
- **CREATE A SAFER COMMUNITY** by reducing drug use in public spaces and publicly discarded paraphernalia.

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◦ **Is there a financial benefit to the community?**

Overdose prevention services will reduce fatal opioid overdoses.

As Safehouse will provide immediate reversal in the event of

overdoses, the strain on emergency medical services and health systems will be decreased. By reducing ambulance rides, emergency room trips, and hospital visits, overdose prevention services are expected to save Philadelphia at least \$2 million a year in health care costs. [28]

In addition, by providing a supervised place to consume drugs, fewer people will use drugs on the streets. Less drug paraphernalia will be publicly discarded.

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- **PROTOCOL AND SAFETY**

- **Will data be collected at Safehouse?**

Yes. Data will be collected on a range of information points, including: client demographics, needs assessments, utilization, and referrals for treatment. An evaluation of the impact of the services on overdose fatalities and use of drug treatment will be conducted. Data collection and analysis will be conducted in a manner that respects and preserves client privacy and confidentiality.

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- **Do supervised consumption sites increase neighborhood crime?**

No. Considerable research on neighborhoods around safe

consumption sites has shown no increase in crime.[25] In fact, a decrease in drug-related crime has been reported.[26],[27]

Safehouse believes in a partnership with law enforcement and supports appropriate law enforcement measures to address public safety issues resulting from the opioid epidemic. Safehouse will actively discourage loitering.

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- **What safety and security protocols will exist at Safehouse for both users and the community?**

Safehouse will provide appropriate security for its facilities and immediate surroundings. All participants will be expected to comply with rules to ensure the safety of participants, employees, volunteers, and the public. Safehouse is developing detailed policies and procedures, which it will post in a conspicuous place on location and on its website.

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- **What are Safehouse's rules of use?**

Safehouse's rules of use include:

- No one under age 18 may use the services. Appropriate referrals will be provided to minors.
- No drug dealing.
- No drug sharing.
- No exchange of currency.

- No sharing of consumption equipment.
- No participant may help another consume drugs.
- No staff person may help a participant consume drugs.
- Staff will not handle controlled substances.
- All participants must properly dispose of consumption equipment before leaving the premises.
- Violence, intimidation, and harassment will not be tolerated.
- All participants will treat the staff and other participants with respect.

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◦ **Will Safehouse seek a partnership with law enforcement?**

Yes. Safehouse hopes to have a mutually beneficial, productive partnership with law enforcement, as we have a shared goal of making the community safer.

In Vancouver, police leaders strongly support overdose prevention services.[33] Bill Spearn, a longtime inspector with the Vancouver Police Department, formerly a staunch opponent of the sites, now admits that he was wrong. In May 2018, he said: “If you want to keep these people alive long enough to get them into treatment, you have to give them a space to use.”

In reflecting on the benefit of Vancouver’s overdose prevention services, Spearn said “it made sense to me that the reason that

the number of overdoses that I was attending, or my members were attending, had dropped significantly, was because of Insite." [Insite is North America's first public supervised injection facility.] [34]

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• THE LEGALITY OF SAFEHOUSE

- **Does the law allow overdose prevention services like those provided by Safehouse?**

We believe it does. Safehouse's overdose prevention services are designed to save lives, which is consistent with the intent of federal drug laws.

We believe that 21 U.S. Code § 856 ("Section 856") was never intended to apply, and does not apply, to a nonprofit providing a good faith, public health approach to overdose prevention services, including a supervised consumption room. The purpose of a supervised consumption room is to carry out legitimate medical and public health initiatives that offer scientifically proven interventions effective for encouraging treatment and rehabilitation of individuals addicted to opioids.

Section 856 prohibits maintaining any place "for the purpose of . . . using any controlled substance." The purpose of a supervised consumption room is to save lives by preventing fatal overdoses

and encouraging participants to enter into treatment. It is intended solely as a place to address the public health crisis of opioid addiction by providing harm reduction and emergency response in the event of an overdose or other medical emergency, in addition to providing counseling about safer injection practices and referrals to other social and health services including referrals to addiction treatment, medical care, housing, and other related comprehensive social services.

The express statutory restrictions set forth under Section 856 are not clearly applicable to a supervised consumption room that will be utilized as part of Safehouse's holistic approach to saving lives and providing overdose prevention services.

Philadelphia has a history of creative public health initiatives and prosecutorial discretion. In 1992, then-Mayor Edward G. Rendell and the Board of Health authorized by executive order Prevention Point Philadelphia's syringe exchange program to protect public health by preventing the transmission of HIV. Syringe exchange in Philadelphia has been found to be an effective harm reduction method. Indeed, syringe exchange has reduced new HIV cases in injection drug users in Philadelphia by more than 95 percent, from 819 cases in 1992 when Prevention Point opened to just 27 cases in 2016.[29]

Effective syringe exchange programs also increase the number of injection drug users referred to and retained in substance use treatment. In addition, they increase referral and entry opportunities for social services such as housing, case management, and medical care.[30] Studies also have found that syringe exchange programs do not increase injection drug use.[31]

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EXHIBIT B



U.S. Department of Justice

United States Attorney

Eastern District of Pennsylvania

*William M. McSwain
United States Attorney*

*615 Chestnut Street
Suite 1250
Philadelphia, Pennsylvania 19106-4476
(215) 861-8200*

November 9, 2018

Via Certified Mail (Return Receipt Requested)
and First Class Mail

Jose A. Benitez, M.S.W.
President
Ronda B. Goldfein, Esquire
Vice President
Safehouse
c/o Prevention Point Philadelphia
2913-15 Kensington Avenue
Philadelphia, PA 19134

Re: Safehouse/Proposed Injection Site

Dear Mr. Benitez and Ms. Goldfein:

Earlier this month, Safehouse announced its formation as a nonprofit and intention to open at least one facility in Philadelphia where, among other things, “participants” could inject controlled substances such as heroin and fentanyl in a “consumption room” under medical supervision. It also plans to offer onsite medical care and referral services such as wound care, onsite initiation of medication-assisted treatment for substance abuse, and referrals to primary care. In addition, it will offer a series of “wrap-around social services” such as referrals to social services, legal services, and housing opportunities.

While the U.S. Attorney’s Office supports many of the services that Safehouse proposes to offer, including the medical and social referral services, Safehouse’s proposed “consumption room” for injection of illicit drugs would violate federal law. Specifically, Title 21, United States Code, Section 856 provides in relevant part that “it shall be unlawful to”:

(a)(1) knowingly open or maintain any place for the purpose of manufacturing, distributing, or using any controlled substance;

(a)(2) manage or control any place whether permanently or temporarily, either as an owner, lessee, agent, employee, occupant, or mortgagee, and knowingly and intentionally rent, lease, profit from, or make available for use, with or without

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c/o Prevention Point Philadelphia
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compensation, the place for the purpose of unlawfully manufacturing, storing, distributing, or using a controlled substance.

Section 856(a)(2), in particular, encompasses a broad range of relationships and conduct. It reaches a person or entity who has management or control over a place made available for the unlawful use of controlled substances, whether “permanently” or “temporarily.” It covers not only landlords, but also lessees, agents, employees, occupants, and even mortgagees (*i.e.*, lending institutions). It applies whether the place is made available “with or without compensation,” explicitly encompassing a situation such as this one where Safehouse does not plan to profit from the use of the property. Moreover, the statute makes no exception for entities, such as Safehouse, who claim a benevolent purpose or purpose other than the use of controlled substances. *See, e.g., United States v. Tamez*, 941 F.2d 770, 774 (9th Cir. 1991).

Please ensure that your organization, board members, and employees comply with federal law. The Department of Justice will pursue appropriate legal remedies should you fail to ensure your organization’s compliance.

The Department of Justice is committed to ending the opioid epidemic through prevention, enforcement, and treatment efforts. We recognize that Safehouse and its proponents share our goal of combatting the scourge of opioid abuse. I appreciated the recent opportunity to tour Prevention Point with Mr. Benitez and I thank Ms. Goldfein for proactively contacting my office to keep us apprised of Safehouse’s intentions. Many of the services Safehouse intends to provide appear worthwhile and commendable. While we do not and cannot approve of Safehouse’s “consumption room,” we invite a continuing dialogue with you to hear more about your proposal and to discuss how we can work together to fight this epidemic within existing federal law.

Very truly yours,


WILLIAM M. MCSWAIN
United States Attorney

EXHIBIT C

Safehouse

A public health approach to overdose prevention in Philadelphia

November 26, 2018

2019 11/26 20 P 3:01

William M. McSwain
U.S. Department of Justice
U.S. Attorney
Eastern District of Pennsylvania
615 Chestnut Street
Suite 1250
Philadelphia, PA 19106-4476

Dear U.S. Attorney McSwain:

Thank you for letter of November 9 and the invitation to continue the dialogue about our efforts to provide overdose prevention services. We are grateful for a Department of Justice that embraces the need to combat the scourge of opioid abuse.

To ensure candor in our ongoing dialogue, we would like to share our thoughts about this initiative.

We respectfully disagree with the conclusion that Safehouse's proposed consumption room would violate federal law. The legislative intent of Title 21, United States Code, Section 856 is to prohibit individuals from knowingly allowing their property to be used for the purpose of distributing or using drugs for profit. We believe that a proper and constitutional application of Section 856 does not prohibit our primary purpose of preventing fatal overdoses.

Overdose prevention is part of a multifaceted public health approach to combating the opioid crisis. Extensive research has demonstrated the benefits of overdose prevention services for people who use drugs and the communities where drug use occurs. For more on the services to be offered, please see safehousephilly.org.

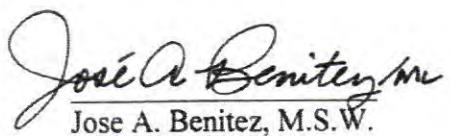
Moreover, the leaders and organizers of Safehouse are motivated by the Judeo-Christian beliefs ingrained in us from our religious schooling, our devout families and our practices of worship. At the core of our faith is the principle that preservation of human life overrides any other considerations. As witnesses to great losses of life in our community, we are compelled by our religious beliefs to take action to save lives.

Finally, we hope that the U.S. Attorney's office will exercise prosecutorial discretion in assessing our proposed overdose prevention services. This is not a request that your office approve or ignore Safehouse's proposed consumption room, but rather that the

same discretion in prosecution, that is shown in a range of activities that may be considered unlawful, be exercised here.

We welcome the opportunity to meet and discuss our shared goals of fighting this epidemic.

Respectfully,



Jose A. Benitez, M.S.W.



Ronda B. Goldfein, Esq.